

Swansea Bay University Health Board

Unconfirmed

Minutes of the Meeting of the Health and Safety Committee 20th January 2022 via Microsoft Teams

Present

Maggie Berry	Independent Member (in the chair)
Jackie Davies	Independent Member
Tom Crick	Independent Member (to minute 08/22)

In Attendance

Debbie Eyitayo	Director of Workforce and OD
Mark Parsons	Assistant Director of Health and Safety
Des Keighan	Assistant Director of Operations - Estates
Hazel Lloyd	Acting Director of Corporate Governance (to minute 09/22 and from minute 11/22)
Darren Griffiths	Director of Finance and Performance (from minute 12/22)
Inese Robotham	Chief Operating Officer (from minute 07/22)
Rhian Lewis	Internal Audit
Laurie Higgs	Head of Health and Safety
Neil Thomas	Deputy Head of Risk
Leah Joseph	Corporate Governance Officer

Minute No.		Action
01/22	APOLOGIES	
	Apologies for absence were received from Joanne Jones, Head of Support Services.	
02/22	WELCOME / INTRODUCTORY REMARKS	
	The chair welcomed everyone to the meeting, in particular Darren Griffiths as the new lead executive for the Health and Safety Committee. Maggie Berry thanked Gareth Howells, Director of Nursing and Patient Experience for his work as predecessor.	
03/22	DECLARATION OF INTERESTS	
	There were no declarations of interest.	

04/22	MINUTES OF THE PREVIOUS MEETING	
	The minutes of the meetings held on 5 th October 2021 were received and confirmed as a true and accurate record.	
05/22	MATTERS ARISING	
	<p>i. <u>82/21 Primary, Community and Therapies Service (PCTS) highlight report</u></p> <p>Jackie Davies queried whether the implementation position of Trauma Risk Management (TRiM) in PCTS had improved. Debbie Eytayo confirmed that progress had been made and the workforce team were trying to bid for funding for 2022/23 onwards to continue the support for staff.</p> <p>ii. <u>81/21 Recent inspections and audits</u></p> <p>Maggie Berry queried whether Morriston Hospital's leaking roof had been repaired. Des Keighan advised that two separate companies had visited the site to work on repairs, and works had been completed. Maggie Berry was pleased with the update. Mark Parsons highlighted that environmental health are due to return to the site to review the catering rating, but this could take a few months.</p> <p>iii. <u>86/21 Site Responsibility</u></p> <p>Maggie Berry informed committee members that the site visits that had been planned for her and Mark Parsons had been delayed due to the operational pressures following COVID-19. She was hoping to continue her visits in April 2022 and welcomed attendance from another Independent Member. Both Jackie Davies and Tom Crick confirmed their interest.</p> <p>iv. <u>89/21 First Cymru public transport</u></p> <p>Maggie Berry queried the status of the public transport position for staff and patients. Debbie Eytayo had not been made aware of further issues. Maggie Berry noted that if there were issues, the Head of Support Services would have advised.</p>	
06/22	ACTION LOG	
	<p>The action log was received.</p> <p>i. <u>132/19 Caswell Clinic camera and alarm system</u></p>	

	<p>Mark Parsons advised that there had been good dialogue surrounding the design and specification, and Swansea Bay University Health Board (SBUHB) awaited confirmation from Cwm Taf Morgannwg University Health Board (CTMUHB). He noted that CTMUHB were aware that the item remained on the Health and Safety Committee action log. Maggie Berry suggested that Glanrhyd Hospital was one of the sites visited when monitoring site responsibility. Jackie Davies queried which Health Board was responsible for general maintenance. Des Keighan advised that CTMUHB had monthly meetings to prioritise general maintenance works.</p> <p>ii. <u>22/21 and 79/21 Face-to-face training for Executives and Independent Members for training on institution of occupational safety and health (IOSH) and Health and Safety Infrastructure training</u></p> <p>Mark Parsons advised that the digital route would be sourced if face-to-face training was not possible.</p> <p>iii. <u>18/21 Tender of water risk assessments</u></p> <p>Des Keighan advised that work had commenced and completion was scheduled for the end of the financial year.</p> <p>iv. <u>14/20 Six facet review of backlog maintenance</u></p> <p>Des Keighan advised that work had commenced and completion was scheduled for the end of the financial year.</p> <p>v. <u>Personal injury file reviews</u></p> <p>Maggie Berry requested that personal injury file reviews be added to the work programme on an annual basis for the month of January.</p>	MB
Resolved:	<ul style="list-style-type: none"> - Personal injury file reviews be added to the work programme on an annual basis for the month of January - The action log was noted. 	MB
07/22	HEALTH AND SAFETY RISK REGISTER	
	<p>A report providing an update on the Health and Safety risk register was received.</p> <p>In introducing the report, Neil Thomas highlighted the following points:</p> <ul style="list-style-type: none"> - The Health Board Risk Register (HBRR) was last presented to the Board in November 2021. The Board endorsed continuation of the risk appetite score level of 20; - The risks currently assigned to the Health and Safety Committee 	

are health and safety infrastructure; fire safety compliance; and environment of premises;

- Two risks are assigned to the Health and Safety Committee for oversight: storage of paper records and partnership working.
- The updated HBRR is due to be taken to Health Board on 27th January 2022 for endorsement;
- Risk management training workshops with Neath Port Talbot and Singleton Service Group (NPTSSG) have completed and PCTS are due to receive training shortly;
- The COVID-19 risk register has been taken through Management Board for scrutiny.

In discussing the report, the following points were raised:

Mark Parsons reflected that risks could change quickly with major impacts on services e.g. Morriston Hospital's leaking roof. He suggested that the risk appetite should include possible consequences within the scoring mechanism. Hazel Lloyd advised that the point was relevant and that it had been picked up with service groups within the training workshops. She stated that there was an intention to deliver the training to other service groups.

Mark Parsons suggested that the wording surrounding risk numbered 841 relating to environment of premises be revised to reflect the work that has been ongoing since 2012. Neil Thomas was happy to update the wording outside of the meeting.

Des Keighan thanked Neil Thomas and Mark Parsons for their assistance categorising the estates risks.

Jackie Davies noted that SBUHB should encourage employees to become health and safety representatives, as currently there was no training provided by trade unions as employees are stewards. Debbie Eytayo undertook to liaise with the Assistant Director of Workforce for the issue to be discussed further at the staff side sub-group.

Jackie Davies highlighted that the report detailed that NPTSSG had a total of 17 risks. Mark Parsons advised that NPTSSG are good at identifying risks and are in a better position than other areas of the Health Board.

Jackie Davies queried if the reviews and progress of risk numbered 841 relating to environment of premises were captured as the risks had been ongoing since 2012. Mark Parsons advised that staff are managing risks on a daily basis and there was an opportunity to query whether they were risks in the first instance. He advised that the progress was captured.

Jackie Davies noted that improvement notices could be linked to local

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	<p>health and safety forums and this could be encouraged when recruiting health and safety representatives. She noted that risk numbered 41 relating to fire safety regulation compliance had a deadline date of February 2024, and queried if committee members were content with that deadline. Mark Parsons advised that there are complications surrounding the cladding work at Singleton Hospital. There were a number of things that had to be reviewed due to the previous work that was undertaken, and this had delayed the programme. Additional asbestos removal and adverse weather conditions have affected the overall program and the deadline had to be reviewed. The team are trying to expedite the work, however SBUHB is not in a position to reduce the risk. Maggie Berry requested that cladding progress is added to the in-committee action log for July 2022.</p> <p>Maggie Berry queried if service groups reviewed the higher operational risks. Mark Parsons assured committee members that service groups review the risks at the Health and Safety Operational Group meetings.</p> <p>Maggie Berry queried how the risk management training was being received and whether the training could promote the need for health and safety leads. Neil Thomas advised that this could be picked up as part of the next roll out. The training content was developing as it was delivered. The sessions currently present a theory and then attendees are asked to reflect, highlight and engage with fellow employees to spot risks. Hazel Lloyd thanked Neil Thomas and echoed his comments. The team have learned from the virtual meeting groups, and they have proven to be helpful and were received positively.</p> <p>Debbie Eytayo stated that health and safety training for trade union colleagues would be promoted at the next staff side sub-group.</p> <p>Laurie Higgs advised that health and safety representatives' were invited to receive training and some attended recent management training sessions for reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR). They took place last autumn and approximately 80 people attended.</p>	<p>MP</p> <p>DE</p>
<p>Resolved:</p>	<ul style="list-style-type: none"> - Staff side sub-group to discuss SBUHB encouraging employees to become Trade union sponsored health and safety representatives. - Progress report on cladding to be added to the in-committee action log for July 2022. - The updates to the Health Board Risk Register risks assigned to the Committee, and COVID-19 Gold Command risk register were noted. 	<p>DE</p> <p>MP</p>

08/22	PERSONAL INJURY FILE REVIEWS	
	<p>A report providing an update on personal injury file reviews was received.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> – There has been a reduction in Personal Injury Claims (PIC) and the ongoing lessons learnt through the management of PIC; – During the last financial year the Health Board received a total of 55 PIC. 11 of these claims were in relation to hydrogen peroxide vapour machines (HPV), and all of these claims have settled. – There are has been a decrease in needlestick injury claims; – Total payments in relation to PIC have increased between April 2020 and March 2021; – Pre-action disclosure applications have decreased for the Health Board, which is a cost saving; – The Health Board settled 38 claims, and the recurring themes from PIC were slips, trips, falls, violence and aggression, faulty plug sockets and manual handling; – For each cases, a detailed learning from event was completed and sent to Welsh Risk Pool. <p>In discussing the report, the following points were raised:</p> <p>Des Keighan highlighted an issue surrounding claims relating to car parks and as the incident does not take place in a department or ward, there is not much information to review. He advised that it was difficult to release staff to walk the grounds and check the car parks; however he was working with colleagues to find a solution to address the problem. Mark Parsons advised that parking attendants were previously used in certain areas. He queried whether a map of the car parks could be used to mark off any potholes on a quarterly basis so that issues could be logged and managed. Des Keighan supported the idea and would speak to the Head of Support Services outside of the committee meeting. Mark Parsons advised that the health and safety representatives could be used to complete the checks.</p> <p>Jackie Davies queried if SBUHB utilised the closed-circuit television (CCTV). Des Keighan advised that there have been issues between the date of the incident and the delay of making the claim. Some systems can override over time and if the gap between the claim and the incident was too big, the evidence may have been deleted. Hazel Lloyd assured committee members that CCTV was routinely checked if available.</p>	

	<p>Jackie Davies queried whether the violence and aggressions claims related to intoxicated people. Hazel Lloyd stated that there was a cluster of incidents that linked to detox and intoxication in violence and aggression claims. Mental Health and Learning Disabilities cases were predominant and some claims linked to the lack of a care plan for patients.</p> <p>Jackie Davies queried why 11 cases took nearly six years to close, and whether the cases were contentious and complicated. Hazel Lloyd advised that timings could often be linked to the time it took for the claimant to prove their claim, and sometimes cases are complicated which can lengthen the process.</p> <p>Jackie Davies found the analysis of slips, trips and falls interesting. She highlighted that there could be a correlation between the data and the ability for Neath Port Talbot Hospital to care for the elderly patients. The training that staff have received could have helped decrease the number of claims.</p> <p>Maggie Berry noted that the information within the report was historical, and queried if there was a way to ensure the information was recent. Hazel Lloyd advised that the process could be reviewed internally to ensure the reporting was timelier for committee members.</p> <p>Maggie Berry queried the position of the HPV claims. Hazel Lloyd advised that all HPV claims have concluded. Laurie Higgs advised that only a proportion of staff who used HPV pursued claims.</p> <p>Maggie Berry queried how plug sockets were being monitored. Des Keighan advised that the estates team relied on staff to inform estates via the portal; however a review does take place every five years.</p> <p>Mark Parsons advised that training had been developed by Laurie Higgs which had relevant competencies for staff. Laurie Higgs stated that the training also linked into the home environment and the session took approximately 20 minutes to complete. Des Keighan thanked Laurie Higgs and team for their assistance with the training module.</p> <p>Maggie Berry queried if the changes in the workplace environment had increased stress related claims in the past two years. Hazel Lloyd had not seen any claims related to stress. Debbie Eytayo advised that SBUHB's investment in occupational health and TRiM could be useful to correlate the impacts against any claims received going forward. Maggie Berry noted that so much had changed in the workplace environment over the past two years.</p>	
<p>Resolved:</p>	<p>The report was noted.</p>	

09/22	HEALTH AND SAFETY STRATEGIC ACTION PLAN	
	<p>A verbal update on the health and safety strategic action plan was received.</p> <p>In introducing the update, Mark Parsons highlighted that progress on actions had been good, however resources remained an issue and steps were in place to resolve the problems.</p> <p>In discussing the item, Maggie Berry requested a substantive report in April 2022.</p>	MP
Resolved:	<ul style="list-style-type: none"> - A substantive progress report be received in April 2022. - The report was noted. 	MP
10/22	COVID-19 HEALTH AND SAFETY ISSUES	
	<p>A verbal update on COVID-19 health and safety issues was received.</p> <p>In introducing the update, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> - SBUHB has continued with physical distancing across all sites; - COVID-19 advice posters are being reinvigorated along with lateral flow testing communications; - Other guidance is being reviewed in silver and gold COVID-19 groups as the detail is changing so quickly; - England is due to relax its guidance, however specialised health and social care settings may not change the procedures already currently in place; - SBUHB awaits feedback following updated guidance on personal protective equipment, and in particular FFP3 masks. 	
Resolved	The update was noted .	
11/22	FIRE SAFETY MANAGEMENT	
	<p>A report on fire safety management was received.</p> <p>In introducing the update, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> - All actions detailed in the 2020 audit action plan are complete, apart from one relating to fire drawings; 	

	<ul style="list-style-type: none"> – A fire compartmentation survey was underway; – Infrastructure decarbonisation work has been underway at Singleton Hospital and Morriston Hospital, with progress ongoing; – The first fire safety officer is due to begin on 24th January 2022, and the second fire safety officer is expected to begin the role in February 2022; – Fire action plans are being monitored via the fire safety group and actions are updated via a database and verified at a later review. <p>In discussing the item, the following points were raised:</p> <p>Jackie Davies suggested that one of the fire safety officers could be asked to record a staff story for the Health Board meeting to show staff development.</p> <p>Maggie Berry noted that only 60% of Morriston Hospital’s action plans had been completed, and queried whether the remaining 40% was due to lack of resources. Mark Parsons advised that certain elements had impacted the completion rate, however updates would be provided through the Health and Safety Operational Group. He advised that it had been difficult to obtain information from service groups due to the operational pressure following the pandemic.</p>	
Resolved:	The report be noted .	
12/22	HEALTH AND SAFETY OPERATIONAL GROUP KEY ISSUES REPORT	
	<p>A key issues report on Health and Safety Operational Group was received.</p> <p>In introducing the report, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> – Service groups have embedded the new governance structures; – Key themes linked to staff shortages; – A deep dive on violence and aggression had taken place and the main hot spots for violence and aggression were the emergency department, recovery from anaesthesia, Neath Port Talbot Hospital (NPTH) and Mental Health and Learning Disabilities; – The fire risk assessment was 100% compliant. <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry highlighted that one risk related to lack of space within NPTH’s minor injury unit, however in November and December 2021</p>	

	<p>SBUHB's issued communications advising people to utilise the unit instead of the emergency department. She queried if the communications shared caused more issues. Mark Parsons advised that in November and December 2021, a phone triage system was in place which minimised the footfall on the unit at one time.</p> <p>Maggie Berry was disappointed that PCTS did not have representation at the last Health and Safety Operational Group. Mark Parsons advised that formal apologies had been received due to the operational pressures, and a new Head of Operations would be leading on this going forward.</p> <p>Maggie Berry noted that there was no statutory and mandatory training information for the estates department. Des Keighan apologised and confirmed that it would be included in reports going forward.</p> <p>Maggie Berry queried the trade union concern relating to the number of staff who have long COVID-19. Debbie Eyitayo advised that there was no information at this stage; however she agreed to have a detailed discussion at the trade union partnership forum.. Maggie Berry requested that this was referred to Workforce and OD.</p>	DE
Resolved:	<ul style="list-style-type: none"> – The number of staff who have long COVID-19 to be referred to Workforce and OD. – The report was noted. 	DE
13/22	SITE RESPONSIBILITY ALLOCATION	
	<p>A verbal update on site responsibility allocation was received.</p> <p>In introducing the update, Mark Parsons highlighted the following points:</p> <ul style="list-style-type: none"> – He had met with the Service Director for PCTS a few times, however there is a need for PCTS to work through the suggested recommendations made by Mark Parsons; – A report detailing people inside each building is needed, included heads of service; – General Practitioner's or representative of the practice may need to take on the lead of site responsibility; – Even though there are a few buildings managed by shared services, the stakeholder would need to take on site responsibility. <p>In discussing the item, the following points were raised:</p> <p>Maggie Berry stated that even if the building was not the responsibility of SBUHB, a Health Board employee within each building should still need to be the nominated responsible person.</p>	

	Darren Griffiths advised that the work may need arbitration and he would be willing to act as an arbitrator to make the final decisions. Maggie Berry requested that an updated action plan is brought back to the committee in 10 months.	MP
Resolved:	<ul style="list-style-type: none"> - Updated action plan be received in October 2022. - The update was noted. 	MP
14/22	ITEMS TO REFER TO OTHER COMMITTEES	
Resolved:	Items to refer to Workforce and OD Committee have already been discussed at minutes 12/22.	
15/22	ANY OTHER BUSINESS	
Resolved:	There were no items raised and the meeting was closed.	
16/22	DATE OF NEXT COMMITTEE MEETING	
	The next scheduled meeting is 5 th April 2022.	